

MB  
10/19

ISSUE SLIP STAPLE AREA (for additional cross references)

6/18

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	kw	68904	9/12/00
O.I.P.E. CLASSIFIER		5	9-18-00
FORMALITY REVIEW	NR		10/17/00
RESPONSE FORMALITY REVIEW	NH	617	12-20-00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet her